

THE HEALTH CARE SAFETY NET
IMPROVEMENT ACT OF 2001

HON. FRED UPTON

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, December 11, 2001

Mr. UPTON. Mr. Speaker, I rise in strong support of the Health Care Safety Net Improvement Act of 2001. This legislation reauthorizes the Consolidated Health Centers program, the National Health Service Corps, and several programs vital to access to care in rural America. It also provides statutory authority for and direction to the Health Resources and Services Administration's Office for the Advancement of Telehealth and provides for a study on overcoming the barriers that many migrant farm workers and their families experience in seeking health care services as they move from state to state. Taken together, these programs and activities will help to strengthen our nation's health care delivery system by improving access to care and quality of care in our rural and inner-city medically underserved communities.

Health centers are located in 3,000 rural and urban communities throughout the country and provide quality primary and preventive health services to over 10 million low-income and uninsured patients. With the number of uninsured in this nation growing by more than 100,000 per month, it is estimated that 53 million people will lack health insurance by 2007. Health centers have played and will continue to play a vital role in addressing this serious problem.

We are fortunate in my Southwest Michigan district to have two strong networks of community and migrant health centers providing care to over 40,000 people. These centers and the people they serve benefit greatly from the doctors and dentists who are participating in the National Health Service Corps Loan Repayment program.

As Chairman of the Energy and Commerce Committee's Telecommunications and the Internet Subcommittee and a senior member of its Health Subcommittee, I have been particularly interested in the role that rapidly emerging telehealth technologies can play in increasing access to care and quality of care in rural and inner-city America. I was pleased to work with my colleagues on the Committee to include provisions in the Health Care Safety Net Improvement Act formally authorizing the Office for the Advancement of Telehealth (OAT). The OAT is currently the focal point for the telehealth activities and programs across federal agencies. It was instrumental in the formation of the Joint Working Group on telemedicine, for which it provides both leadership and staffing.

One of the greatest barriers to recruiting physicians to our rural communities is the sense of isolation they may feel in their practices. Telehealth services can address that barrier by linking rural primary care physicians and their patients with specialists in major medical centers across the nation. Further, one of the looming threats to access to care and quality of care is the growing shortage of nurses, pharmacists, and clinical laboratory personnel. Telehealth services can address this problem by bringing education and training programs right into local communities.

I hope everyone will join me today in strongly supporting the Health Care Safety Net Im-

provement Act. This bipartisan, thoughtful and innovative legislation will improve access to care and quality of care for millions in urban and rural America.

IN HONOR OF DARREN PEARSON

HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, December 11, 2001

Mr. TOWNS. Mr. Speaker, I rise today to honor Mr. Darren Pearson in recognition of his community service as well as his successful real estate businesses in Brooklyn and Queens, NY.

Mr. Pearson's businesses include a full-service real estate firm, apartment building management, and construction and maintenance. Before becoming involved in real estate, Darren worked as an account executive for Amergold Corp. He also worked for Vanguard Oil as a fuel salesman in the commercial and barge departments. His duties included fuel sales to Con Edison, PSE&G, and LILCO. He was subsequently promoted to director of public relations for Vanguard and was responsible for the home oil transfer program, which provided oil to needy families at either a discount or no cost. His success in that position led to his promotion to vice president of procurement and industrial sales for Vanco Oil Co., a subsidiary of Vanguard.

Darren is active in the Brooklyn and Manhattan communities. He is the chairman of the Men's Caucus for Congressman TOWNS, a member of 100 Black Men, Inc., and New York State Senator David Patterson's Progressive Professional Network. As a young businessman, Darren hires and trains college-bound students as trainees in real estate management and office administration.

Mr. Speaker, Darren Pearson is a young entrepreneur committed to working with his community and promoting opportunities for others. As such, he is more than worthy of receiving this recognition, and I urge my colleagues to join me in honoring this remarkable man.

IN HONOR OF ERNEST A. SAMPSON
III

HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, December 11, 2001

Mr. TOWNS. Mr. Speaker, I rise in honor of Ernest A. Sampson, III, in recognition of his dedication to his community.

Ernest A. Sampson, III, was born in New York City. He is the youngest of three children born to Fay and "the late" Ernest Sampson. He received his early education in the New York City Public School System. He graduated from Cardinal Hayes High School in the Bronx, and went on to receive his Bachelor of Arts Degree in Funeral Service Administration from St. John's University in 1986. During his junior year, he attended the American Academy McAllister Institute. During his senior year, he apprenticed at his grandfather's funeral home "The James H. Willie Funeral Home, Inc."

Ernest is a Master Mason hailing from African Lodge 459#63 in Brooklyn, NY. He re-

ceives his religious instruction from the Lord Jesus Christ through Archbishop Roy E. Brown, Pastor of Pilgrim Assemblies International.

Ernest with the support of his mentor, James H. Willies, established Sampson Funeral Service in March of 1993. Being committed to community service, he conducts numerous seminars, educating people on city burial programs and what to do when the Lord calls someone home. Ernest has also spoken at several public schools to young children on their career day. In early 2001, Ernest cited by the Mayor and Councilwoman Annette Robinson as a "Man Of Courage." Ernest is the proud husband of Debbie Sampson and the proud father of Ernest IV, Sheniqua, Alyssia, Tiara and his spiritual daughter, Alexis.

Mr. Speaker, Ernest A. Sampson, III is a hard working man of God, dedicated to his family and his community. As such he is more than worthy of receiving our recognition today. I urge my colleagues to join me in honoring this truly remarkable man.

STATEMENT IN SUPPORT OF THE
NURSE REINVESTMENT ACT

HON. JOSEPH R. PITTS

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, December 11, 2001

Mr. PITTS. Mr. Speaker, I rise in support of this important legislation, the Nurse Reinvestment Act, to help relieve America's nursing shortage.

Every American should be concerned about the growing shortage of nurses. Just as more Americans are reaching their golden years, fewer nurses are graduating from nursing schools to provide them the quality health care they earned and deserve.

Less well known, but of equal severity and concern, is the fact that there is a shortage of nurse anesthetists in America. Certified Registered Nurse Anesthetists, or CRNAs, provide 65 percent of anesthetics in the U.S., and are the sole anesthesia provider to 70 percent of U.S. rural hospitals. They are the military's predominant anesthesia provider, especially on U.S. Navy ships and at forward-deployed locations, serving our men and women in uniform as we are united in America's war on terror. They are registered nurses, who go on to complete masters-level education and certification in nurse anesthesia, and are considered a type of advanced practice nurse, licensed to practice in all 50 states. America's 28,000 CRNAs meet the most stringent continuing education and recertification requirements in anesthesia care. And with all this, the Institute of Medicine reported in its landmark survey of medical errors, *To Err Is Human*, that anesthesia care is 50 times safer than 20 years ago.

And there are not enough CRNAs today. The growth in the number of Medicare-eligible Americans compounds the growth in the number of surgical procedures requiring anesthetics. A 2001 survey of nurse anesthetist managers reported a 250 percent increase in CRNA vacancies among those managers reporting vacancies just since 1997. America's 83 accredited schools of nurse anesthesia are graduating more CRNAs, just not enough to keep up with growing demand. In real life, this